



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
 By Tracy Crews at 8:52 am, May 13, 2024

REPORT #7

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 119736	NAME OF AGENCY LAWRENCE COUNTY SHERIFF'S OFFICE	DATE OF INSPECTION 03/22/2024
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LOCATION OF INSTRUMENT (STREET AND CITY) 240 N. MAIN ST - MT. VERNON, MO 65712	TIME OF INSPECTION 3:13 pm
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CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

- DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)
- TEMPERATURE OF ALCO SENSOR (10°C - 40°C)
- PRINTER WORKING PROPERLY
- TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>INTOXIMETERS</u>	LOT # <u>AG215102</u> EXP. DATE <u>05/31/2024</u>
<input type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C)	SIM. SN _____ SIM. NIST EXP DATE _____

- CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)
 Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)
 - 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
 - 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
 - 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 .096	TEST 2 .096	TEST 3 .095
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- RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	(0-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

Instrument printer was sent out for repair. Calibration was performed upon its return. 9V battery replaced.

INSPECTING OFFICER

SIGNATURE 	PRINT NAME RYAN DEVOST
TYPE II PERMIT NUMBER/EXPIRATION DATE 230066 - 04/07/2025	TELEPHONE NUMBER (417) 466-2131

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IV Serial no: 119736
Version no: 532C

TEST RECORD 00166

Temp Date Time ^{s/} 210L

Air Blank:
05/18/24 18:12 .000
Calibration Check:
24 05/18/24 18:12 .096

Subject Name

CALIBRATION

Subject I.D.

Operator Name, I.D.

Location

By Dent

AS IV Serial no: 119736
Version no: 532C

TEST RECORD 00167

Temp Date Time ^{s/} 210L

Air Blank:
05/18/24 18:14 .000
Calibration Check:
24 05/18/24 18:14 .096

Subject Name

TEST #1

Subject I.D.

Operator Name, I.D.

Location

By Dent

AS IV Serial no: 119736
Version no: 532C

TEST RECORD 00168

Temp Date Time ^{s/} 210L

Air Blank:
05/18/24 18:16 .000
Calibration Check:
24 05/18/24 18:16 .096

Subject Name

TEST #2

Subject I.D.

Operator Name, I.D.

Location

By Dent

AS IV Serial no: 119736
Version no: 532C

TEST RECORD 00169

Temp Date Time ^{s/} 210L

Air Blank:
05/18/24 18:20 .000
Calibration Check:
24 05/18/24 18:20 .095

Subject Name

TEST #3

Subject I.D.

Operator Name, I.D.

Location

By Dent

AS IV Serial no: 119736
Version no: 532C

TEST RECORD 00170

Temp Date Time ^{s/} 210L

Air Blank:
05/18/24 18:23 .000
Calibration Check:
24 05/18/24 18:23 .095

Subject Name

TEST #4

Subject I.D.

Operator Name, I.D.

Location

By Dent

AS IV Serial no: 119736
Version no: 532C

TEST RECORD 00171

Temp Date Time ^{s/} 210L

VOID: RFI
12 05/18/24 18:24

Subject Name

RFI TEST

Subject I.D.

Operator Name, I.D.

Location

By Dent

AS IV Serial no: 119736
Version no: 532C

TEST RECORD 00172

Temp Date Time ^{s/} 210L

Air Blank:
05/18/24 18:25 .000
Calibration Check:
25 05/18/24 18:25 .007

Subject Name

SOBER Sample

Subject I.D.

Operator Name, I.D.

Location

By Dent